

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D.

OMB APP	OMB APPROVAL				
OMB Number: 3235-00					
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SEC USE ONLY					
Prefix		Se	rial		
DA	TE RECE	IVED			

SECTION 4(6), AND/OR	DATERECEIVED
1764354 UNIFORM LIMITED OFFERING EXEMI	PTION
Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.) Chestnut McClellan #1 Joint Venture	RECEIVED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	NOV 0 5 2003
A. BASIC IDENTIFICATION DATA	The state of the s
1. Enter the information requested about the issuer	121
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	1000
Chestnut McClellan #1 Joint Venture	
Address of Executive Offices (Number and Street, City, State, Zip Code) 2800 Regal Road, Suite 106, Plano, Texas 75075	Telephone Number (Including Area Code) 972-612-7200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Oil and gas drilling joint venture	
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	lease specify): Joint Venture
Month Year Actual or Estimated Date of Incorporation or Organization: ITO 013 Actual X Estim	
urisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	NOV 06 2003
GENERAL INSTRUCTIONS	THOMSON

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- attention -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



SEC 1972 (6-02)

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
 Each promoter of the issuer, if the issuer has been organized within the past five years; 	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities	of the iss
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	··-
Plummer Exploration, Inc. Business or Residence Address (Number and Street, City, State, Zip Code)	
2800 Regal Road, Suite 106, Plano, Texas 75075	
Check Box(es) that Apply: Promoter Beneficial Owner Ex Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual) Plummer, Mark A.	
Business or Residence Address (Number and Street, City, State, Zip Code) 2800 Regal Road, Suite 106, Plano, Texas 75075	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual) Plummer, Kelly McVey	
Business or Residence Address (Number and Street, City, State, Zip Code) 2800 Regal Road, Suite 106, Plano, Texas 75075	
Check Box(es) that Apply: Promoter Beneficial Owner \(\overline{\overline{\chi}}\) Executive Officer \(\overline{\chi}\) Director Managing Partner	
Full Name (Last name first, if individual) Tapia, Thomas E.	
Business or Residence Address (Number and Street, City, State, Zip Code) 2800 Regal Road, Suite 106, Plano, Texas 75075	
heck Box(es) that Apply Promoter Beneficial Owner XX Executive Officer Director General and/or Managing Partner	-
ull Name (Last name first, if individual) Solomon Jr., Mark J.	
usiness or Residence Address (Number and Street, City, State, Zip Code)	
2800 Regal Road, Suite 106, Plano, Texas 75075	
heck Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
all Name (Last name first, if individual)	
usiness or Residence Address (Number and Street, City, State, Zip Code)	
neck Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
If Name (Last name first, if individual)	
isiness or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet or conv and use additional conies of this sheet as necessary)	

200	a especially			B. I	NFORMAT	ION ABOU	T OFFER	NG			a de estado Sed corest.	
1 17-	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No		
1. Has	Answer also in Appendix, Column 2, if filing under ULOE.								\mathbf{x}	Ц		
2. Wh									\$ 14,	480		
									Vec	No		
3. Do	s the offering	g permit joir	nt ownersh	ip of a sing	gle unit?	•••••		····			X	
	er the inform											
	imission or sir person to be li											
or s	tates, list the r oker or deale:	ame of the l	broker or de	ealer. If m	ore than fiv	e (5) perso	ns to be list	ed are asso				
	ne (Last name			- miormac		- DIORET OF						
I un Ivan	ie (East name		,					•				
Business	or Residence	Address (N	Number and	i Street, C	ity, State, 2	Cip Code)						
Name of	Associated B	roker or De	aler									
States in	Which Perso	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		.				
(Che	ck "All State	s" or check	individual	States)				***************************************			☐ AI	l States
AL] [AK]	AZ	AR	CA	CO	CT	DE	[DC]	FL	GA	HI	[ID]
ΙL		ΙΑ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT		NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	[TN]	TX	ŪT	VT	(VA)	WA	WV	WI	WY	PR
Full Nam	e (Last name	first, if ind	ividual)									
Business	or Residence	e Address (1	Number an	d Street, C	ity, State,	Zip Code)			·			
Name of	Associated B	roker or De	aler		·			<u> </u>				
	Which Person											
(Che	ck "All State	s" or check	individual	States)		************		**************		***************************************	☐ Al	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	<u>aı</u>
		[A]	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	NV SD	ווא] [אד]	[N] [X]	NM UT	NY) VT	NC) VA	ND WA	OH) WV	OK) WI	OR WY	PA PR
	e (Last name											————
ruli Nam	e (Last name	rirst, ir indi	(Vidual)									
Business	or Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Name of	Associated B	roker or De	aler									
States in '	Which Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check "All States" or check individual States)								1 States				
[AL]	AK	AZ	ĀR	CA	<u>[CO]</u>	CT	DE	DC	FL	GA	HI	[D]
	מו	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NII	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	[SC]	SD	TN	TX	UT	$[\nabla T]$	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C: OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security	Aggregate Offering Price	Amount Aiready Sold	Ý
	,, , , , , , , , , , , , , , , , , , ,	_		
	Debt			
	Equity Common Preferred	S	_ s	-
	Convertible Securities (including warrants)	s	s	
	Partnership Interests			-
	Other (Specify)			-
	Total			_
	Answer also in Appendix, Column 3, if filing under ULOE.	·		•
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	e	Aggregate	
		Number Investors	Dollar Amount of Purchases	
	Accredited Investors	18	\$ <u>193,710</u>	
	Non-accredited Investors	. 4	<u>\$ 49,240</u>	_
	Total (for filings under Rule 504 only)		S	
	Answer also in Appendix, Column 4, if filing under ULOE.			
l.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security	Dollar Amoun Sold	t
	Rule 505		S	_
	Regulation A		_	_
	Rule 504		_ s	_
	Total		<u> </u>	_
	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	•		
	Transfer Agent's Fees			
	Printing and Engraving Costs, Legal and Accounting		x \$ 60,000	
	Legal Fees			
	Accounting Fees			
	Engineering Fees	r	s	
	Sales Commissions (specify finders' fees separately)			
	Other Expenses (identify)	[s	_
	Total	_	▼ \$ 60 000	

	C-OPPERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	The state of the s		
<u> </u>		ring price given in response to Part C — Question 1 Question 4.a. This difference is the "adjusted gross		\$ 664,000		
5.	Indicate below the amount of the adjusted gross preeach of the purposes shown. If the amount for ar check the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Part	ny purpose is not known, furnish an estimate and f the payments listed must equal the adjusted gross				
			Payments to Officers, Directors, & Affiliates	Payments to Others		
	Salaries and feesManagement Fee		s 50,000	□ s		
	Purchase of real estate] \$	S		
	Purchase, rental or leasing and installation of mac and equipment		¬ s	— □ \$		
	Construction or leasing of plant buildings and fac			_		
	Acquisition of other businesses (including the val offering that may be used in exchange for the asse issuer pursuant to a merger)	ets or securities of another	- ····			
	Repayment of indebtedness			_		
	Working capital					
	Other (specify): Geology and Enginee					
	Three Dimensional Seismic/Acq	uisition Interpretation		X 5,200		
	Turnkey Drilling, Testing and	Completion	X\$ 569,920	s		
	Column Totals	x	x \$619,920	\$ 44,080		
	Total Payments Listed (column totals added)		¥3 <u>66</u>	4,000		
700		D PYDEKAPSIGNATORUMAS				
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.						
Issue	r (Print or Type)	Signature)ate			
	estnut McClellan #1 Joint Ventu	re Markas	10-29-0	}		
Nam	e of Signer (Print or Type)	Title of Signer (Print or Type)	• т			
Mar	k A. Plummer	President of Plummer Explorat Venturer	ion, Inc.,	managing		

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)